00 INTERNAL TRANSFER REQUEST FOR S.N. 09/494598		
ATE: 4/11/10	FROM: R. STEPAEN D	LDINE, JE (print name)
ORWARD TO:  Art Unit: 7/3  Class: 1+  Subclass: 2787	REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box) (check box)
URTHER EXPLANATION IF NEI	EDED: Boot up ga	Compulo
DATE:	FROM:	(print name)
FORWARD TO: A. Art Unit: B. Class: C Subclass:	REASON(S):  A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check box) (check box)
	FROM:	(print name)
DATE:	REASON(S):	(check box)
FORWARD TO CLASSIFIER	A. You had Parent  B. See Title  C. See Abstract  D. See Claim(s):	(check bar)
FURTHER EXPLANATION IF N	B. See Title C. See Abstract D. See Claim(s):	(check box)
	B. See Title C. See Abstract D. See Claim(s): EEDED:  ASSIFICATION	(check box)
FURTHER EXPLANATION IF N	B. See Title C. See Abstract D. See Claim(s):	(check box)

FURTHER EXPLANATION IF NEEDED: